| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004   |  |  |   |                                |                     |  |            |              | Application or Docket Number $90 - 393$ |                     |                  |                  |          |
|--|--|--|---|--------------------------------|---------------------|--|------------|--------------|---|---------------------|------------------|------------------|----------|
|  |  | CLAIMS A                                       | AS FILED -  |                                | (Column 2)          |  |            | SMALL ENT    | TITY                                    | OTHER THA           |                  |                  |          |
| U.S. NATIONAL STAGE FEES   |  |  |   |                                |                     |  |            | RATE         | FEE                                     | 1                   | RATE             | F                | EE       |
| BASIC FEE  |  |  | SMALL ENT. = \$ 150                                 |                                | LAR                 | LARGE ENT. = \$ 300                    |            | BASIC FEE    |   | OR                  | BASIC FEE        | 300              |          |
| EXAMINATION FEE  |  |  | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100 |                                | 1                   | All other situations = \$ 100 / \$ 200 |            | EXAM. FEE    |   |                     | EXAM. FEE        | 20               |          |
| SEARCH FEE   |  |  | U.S. is ISA = \$ ALL other cou \$ 200 / \$          | untries =                      |                     | other situations =<br>\$ 250 / \$ 500  |            |              |   |                     | SEARCH FEE       | 40               | 9        |
| FEE FOR EXTRA SPEC. PGS.   |  |  | minus 100 =   |                                |                     | / 50 <b>=</b>                          |            | X \$ 125 =   |   | 1                   | X \$ 250 =       | ı                |          |
| TOTAL CHARGEABLE CLAIMS  |  |  | \∫  |                                | *                   |  |            | X \$ 25 =    |   | OR                  | X \$ 50 =        |                  |          |
| INDEPENDENT CLAIMS   |  |  | \ m   | ninus 3 =                      | *                   | -                                      |            | X \$ 100 =   | -                                       | OR                  | X \$ 200 =       |                  | ackslash |
| MULTIPLE DEPENDENT CLAIM PRI   |  |  | ESENT   |                                |                     |  |            | + \$ 180 =   |   | OR                  | + \$ 360 =       |                  | +        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |  |   |                                |                     |  | TOTAL      |              | OR                                      | TOTAL               |                  | +                |          |
| AMENDMENT A  | CLAIMS AS (Column 1)  CLAIMS REMAINING AFTER   |  | (Colum<br>HIGHE<br>NUMB<br>PREVIO                   |                                | nn 2)<br>EST<br>BER | nn 2) (Column 3)                       |            | SMALL E      | ADDI-<br>TIONAL                         | OR                  | OTHER<br>SMALL E | NTIT             | Y<br>DI- |
|  | Total  | *  | Minus   | PAID                           | FOR                 | =                                      | ┟┟         | X \$ 25 =    | FEE                                     | OR                  | X \$ 50 =        | FE               | EE       |
|  | Independent                                    | *  | Minus   | ***                            |                     | =                                      | 1          | X \$ 100 =   | -                                       | OR                  | X \$ 200 =       | <del> </del>     |          |
|  |  | ENTATION OF M                                  |   | ENDENT (                       | CLAIM               |  | -          | + \$ 180 =   |   | OR                  | + \$ 360 =       |                  |          |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |   |                                |                     |  | Ļ          | TOTAL ADDIT. |   | OR                  | TOTAL ADDIT.     |                  |          |
| ÷  |  | (Column 1)                                     |   | (Colur                         | nn 2)               | (Column 3)                             |            | FEE          |   | 1                   | FEE              |                  |          |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>· AFTER<br>AMENDMENT    |   | HIGH<br>NUMI<br>PREVIO<br>PAID | BER                 | PRESENT<br>EXTRA                       |            | RATE         | ADDI-<br>TIONAL<br>FEE                  |                     | RATE             | AD<br>TION<br>FE | NAL      |
|  | Total  | *  | Minus   | **                             |                     | =                                      |            | X \$ 25 =    |   | OR                  | X \$ 50 =        |                  |          |
|  | Independent                                    | *  | Minus   | ***                            | ,                   | =                                      |            | X \$ 100 =   |   | OR                  | X \$ 200 =       |                  |          |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |   |                                |                     |  | + \$ 180 = |              | OR                                      | + \$ 360 =          |                  |                  |          |
| TOTAL ADDIT.<br>FEE  |  |  |   |                                |                     |  |            |              | OR                                      | TOTAL ADDIT.<br>FEE |                  |                  |          |
|  |  | umn 1 is less than the<br>umber Previously Pai |   |                                |                     |  |            |              |   |                     | ·                |                  |          |

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.